

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	ALMAZ	19	DS-30-01 6/30/01
O.I.P.E. CLASSIFIER	N	SES	
FORMALITY REVIEW			8-1-01
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 + Restricted O Objected

Claim	Date
1	
2	1-6-01
3	1-6-01
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5	✓
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15	✓
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24	✓
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Claim	Date
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If more than 150 claims or 10 actions
staple additional sheet here

5/1/01
05/01/01

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